| Fill in this information to identify your c | | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--------|--|--|---|
| 1. ` | Your full name | | |
| (i | Write the name that is on your government-issued picture dentification (for example, | Everaldo First Name | First Name |
| | your driver's license or passport). | Middle Name | Middle Name |
| | | Marmolejo | |
| | Bring your picture dentification to your meeting | Last Name | Last Name |
| \ | with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. / | All other names you | | |
| | have used in the last 8 years | First Name | First Name |
| | nclude your married or | Middle Name | Middle Name |
| ľ | maiden names. | Last Name | Last Name |
| 3. (| Only the last 4 digits of | | |
| | your Social Security | $xxx - xx - \underline{4} \underline{8} \underline{7} \underline{4}$ | xxx - xx |
| - | number or federal Individual Taxpayer | OR | OR |
| ı | dentification number | 9xx - xx - | 9xx - xx - |

(ITIN)

| Del | Debtor 1 Everaldo Marmolejo C | | | Case number (if known) | | |
|--------------------------------|-------------------------------|---|---|---|--|--|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 4. Any business n and Employer | | nployer | ✓ I have not used any business names or EI | Ns. | | |
| (EIN) | (EIN) y | ication Numbers you have used in st 8 years | Business name | Business name | | |
| | | e trade names and | Business name | Business name | | |
| | doing b | ousiness as names | Business name | Business name | | |
| | | | EIN | EIN | | |
| | | | <u> </u> | EIN — — — — — — — — | | |
| 5. | Where | you live | | If Debtor 2 lives at a different address: | | |
| | | | Number Street | Number Street | | |
| | | | | | | |
| | | | El Paso TX 79925 City State ZIP Code | City State ZIP Code | | |
| | | | City State ZIP Code El Paso | City State ZIP Code | | |
| | | | County | County | | |
| | | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. | | |
| | | | Number Street | Number Street | | |
| | | | P.O. Box | P.O. Box | | |
| | | | City State ZIP Code | City State ZIP Code | | |
| 6. | | ou are choosing | Check one: | Check one: | | |
| | this di | strict to file for uptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| Р | art 2: | Tell the Court Abo | out Your Bankruptcy Case | | | |
| 7. | Bankrı | napter of the uptcy Code you | Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top | Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box. | | |
| | are che under | oosing to file | Chapter 7 | | | |
| | | | Chapter 11 | | | |
| | | | Chapter 12 | | | |
| | | | Chapter 13 | | | |

| Debtor 1 Everaldo Marmolejo Ca | | ase number (if known) | | | | |
|--|---|-----------------------|--|--------------------------------|--|--|
| 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's off court for more details about how you may pay. Typically, if you are paying the fee pay with cash, cashier's check, or money order. If your attorney is submitting your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | ing the fee yourself, you may nitting your payment on your | |
| | | | need to pay the fee in installments. If you didividuals to Pay Your Filing Fee in Installmen | | | and attach the Application for |
| | | By th fe | equest that my fee be waived (You may red law, a judge may, but is not required to, waiven 150% of the official poverty line that applie in installments). If you choose this option, thing Fee Waived (Official Form 103B) and file | ve your es to yo you mus | fee, and may do ur family size and st fill out the App | so only if your income is less d you are unable to pay the |
| 9. | Have you filed for | □ No | 0 | | | |
| | bankruptcy within the last 8 years? | — ✓ Ye | es. | | | |
| | | District | Western District of Texas El Paso | When | 05/19/2016 MM / DD / YYYY | Case number <u>16-30787</u> |
| | | District | | When | MM / DD / 2000/ | Case number |
| | | District | | When | | Case number |
| 10. | Are any bankruptcy cases pending or being | ☑ No |) | | | |
| | filed by a spouse who is | ☐ Ye | es. | | | |
| | not filing this case with you, or by a business | Debtor | | | Relationsh | ip to you |
| | partner, or by an affiliate? | District | | When | | Case number, |
| | ammate? | | | | MM / DD / YYYY | if known |
| | | Debtor | | | Relationsh | ip to you |
| | | District | | When | MM / DD / YYYY | Case number, |
| 11. | Do you rent your residence? | ✓ No | Go to line 12.Has your landlord obtained an eviction juresidence? | udgmen | t against you and | d do you want to stay in your |
| | | | No. Go to line 12. Yes. Fill out Initial Statement Abou and file it with this bankruptcy petiti | | iction Judgment | Against You (Form 101A) |

| Deb | tor 1 Everaldo Marmolej o | 0 | | | Case numb | er (if known) | | |
|--|--|-------------------------|-------------------|--|---|--|-----------------------------|-----------------------------------|
| Pa | art 3: Report About Ar | ny Bı | usine | sses You Own as a \$ | Sole Proprietor | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | | | Go to Part 4. Name and location of bus | iness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Southwest By Santa Name of business, if any 1329 Round Dance R Number Street | | | | |
| | 220. | | | El Paso | | TX | 7993 | 88 |
| | If you have more than one sole proprietorship, use a | | | City | | State | ZIP Co | |
| separate sheet and attach it to this petition. | | | | Health Care Busines Single Asset Real E Stockbroker (as def | ox to describe your business (as defined in 11 U.S.C. state (as defined in 11 U. state in 11 U.S.C. § 101(5) (as defined in 11 U.S.C. § | C. § 101(27A)) .S.C. § 101(51E .3A)) | 3)) | |
| 13. | 3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> | | set ap st rece | filing under Chapter 11, the opropriate deadlines. If you nt balance sheet, statemen f these documents do not e | u indicate that you are a s nt of operations, cash-flow | small business v statement, an | debtor, you d federal ir | must attach your ncome tax return |
| | debtor? | $\overline{\checkmark}$ | No. | I am not filing under Cha | pter 11. | | | |
| | For a definition of small business debtor, see | | No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition i the Bankruptcy Code. | | | | |
| | 11 U.S.C. § 101(51D). | | Yes. | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| Pa | art 4: Report If You Ov | vn o | r Hav | e Any Hazardous Pro | operty or Any Prope | erty That Ne | eds Imn | nediate Attentio |
| 14. | 4. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable | | No Yes. | What is the hazard? | | | | |
| hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | If immediate attention is | needed, why is it needed' | ? | | |
| | | | | Where is the property?N | lumber Street | | | |
| | | | | - | iity | | State | ZIP Code |
| | | | | C | rity | | State | ZIF COUR |

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| l am not requi | ired to rece | ive a briefin | g about |
|----------------|--------------|---------------|---------|
| credit counse | | | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of: |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | otor 1 | Everaldo Marmolej | 0 | | | Case number (if I | know | n) |
|-----|---|--|------|--|------|--|------|--|
| P | art 6: | Answer These Q | uest | ions for Reporting Pu | rpos | ses | | |
| 16. | 16. What kind of debts do you have? 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101 as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. ✓ Yes. Go to line 17. | | | | | | | |
| | | | 16b. | money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. | | | | |
| 17. | Are you | u filing under r 7? | ☑ | No. I am not filing under | Chap | ter 7. Go to line 18. | | |
| | any exe exclude admini- are paid availab | estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors? | | | | | - | xempt property is excluded and to distribute to unsecured creditors? |
| 18. | | any creditors do timate that you | | 1-49 50-99 100-199 200-999 | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. | | uch do you te your assets to th? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | | uch do you te your liabilities to | | \$0-\$50,000 \$50,001-\$100,000 | | \$1,000,001-\$10 million \$10,000,001-\$50 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion |

\$50,000,001-\$100 million

\$100,000,001-\$500 million

\$100,001-\$500,000

\$500,001-\$1 million

be?

\$10,000,000,001-\$50 billion

Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| X | /s/ Everaldo Marmolejo | X | |
|---|-------------------------------|-----------------------|---|
| | Everaldo Marmolejo, Debtor 1 | Signature of Debtor 2 | _ |
| | Executed on 04/14/2017 | Executed on | |
| | MM / DD / YYYY | MM / DD / YYYY | |

| Debtor 1 | Everaldo Marmole | ejo | Case number (if know | m) |
|---|------------------|---|-----------------------------------|-----------------------------------|
| For your attorney, if you are represented by one | | I, the attorney for the debtor(s) named in a eligibility to proceed under Chapter 7, 11, relief available under each chapter for wh | 12, or 13 of title 11, United Sta | ates Code, and have explained the |
| If you are not represented by an attorney, you do not need to file this page. | | the debtor(s) the notice required by 11 U. certify that I have no knowledge after an i is incorrect. | • , , | |
| | | X /s/ Karla P. Griffin Signature of Attorney for Debtor | Date | 04/14/2017 MM / DD / YYYY |
| | | Karla P. Griffin | | |

| Fill in this inf | ormation to iden | tify your case | and this filing: | | |
|--|--|---|--|---|--------------------------------------|
| Debtor 1 | Everaldo | | Marmolejo | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruntov Court for the | · WESTERN DI | STRICT OF TEXAS | | |
| | includicy Court for the | . WESTERN DI | OTRIOT OF TEXAS | | |
| Case number (if known) | | | | _ | if this is an ed filing |
| Official Form | 106A/B | | | | |
| Schedule A | B: Property | | | | 12/15 |
| the asset in the ca filing together, bo sheet to this form | ategory where you the th are equally respo . On the top of any a | nink it fits best. It nsible for supply additional pages, | ist an asset only once. If an ass Be as complete and accurate as ing correct information. If more write your name and case numl ng, Land, or Other Real Es | possible. If two married pe space is needed, attach a s per (if known). Answer evel | ople are separate ry question. |
| 30 | | | | | |
| ✓ No. Go t | , , | equitable interes | t in any residence, building, land | l, or similar property? | |
| | • | - | of your entries from Part 1, incl rite that number here | | \$0.00 |
| Part 2: Des | scribe Your Vehi | cles | | | |
| you own that some | | u lease a vehicle, | n any vehicles, whether they are also report it on Schedule G: Exemptotorcycles | _ | • |
| □ No ☑ Yes | | | | | |
| 3.1. Make: | Chevy | Check on | | Do not deduct secured clair amount of any secured clair Creditors Who Have Claims | ms on Schedule D: |
| Model: | Silverado | لخا | or 1 only or 2 only | Current value of the | Current value of the |
| Year: | 2001 | | or 1 and Debtor 2 only | entire property? | portion you own? |
| Approximate milea | ge: | _ At lea | ast one of the debtors and another | \$2,300.00 | \$2,300.00 |
| Other information: 2001 Chevy Silv | erado | | ck if this is community property instructions) | | |
| 3.2. Make: | Dodge | Check on | | Do not deduct secured clair amount of any secured clair | ms on Schedule D: |
| Model: | Model: Charger | | or 1 only or 2 only | Creditors Who Have Claims Current value of the | Current value of the |
| Year: | 2008 | | or 1 and Debtor 2 only | entire property? | portion you own? |
| Approximate milea | ge: | _ | ast one of the debtors and another | \$4,957.00 | \$4,957.00 |
| Other information: | | | to the table to a second second | | |
| 2008 Dodge Cha | arger | | k if this is community property instructions) | | |

| Deb | tor 1 | Everaldo Marmolejo | Case number (if known) |
|-----|--------------------------|--|---|
| 4. | | raft, aircraft, motor homes, ATVs and other recreational vehicles, other ves: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles | |
| 5. | | e dollar value of the portion you own for all of your entries from Part 2, ir for pages you have attached for Part 2. Write that number here | E726700 |
| P | art 3: | Describe Your Personal and Household Items | |
| Do | you own | or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | | nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware | |
| | ☐ No ✓ Yes | s. Describe Household goods & furnishings | \$3,500.00 |
| 7. | Electro Exampl | nics es: Televisions and radios; audio, video, stereo, and digital equipment; comp music collections; electronic devices including cell phones, cameras, me | • |
| | □ No ✓ Yes | s. Describe Electronics | \$1,500.00 |
| 8. | | ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures stamp, coin, or baseball card collections; other collections, memorabilia, | |
| | ✓ No ☐ Yes | s. Describe | |
| 9. | | nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, po- canoes and kayaks; carpentry tools; musical instruments | ol tables, golf clubs, skis; |
| | □ No ✓ Yes | s. Describe Equipment for sports and hobbies | \$400.00 |
| 10. | Firearn Exampl | ns les: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | ✓ No ☐ Yes | s. Describe | |
| 11. | | s es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | |
| | ☐ No ✓ Yes | s. Describe Clothes | \$300.00 |
| 12. | Jewelry Exampl | es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he gold, silver | rloom jewelry, watches, gems, |
| | ☐ No ✓ Yes | s. Describe Jewelry | \$500.00 |
| 13. | Exampl | rm animals les: Dogs, cats, birds, horses | |
| | ✓ No ☐ Yes | s. Describe | |

| Deb | tor 1 | Everaldo Marmolejo | Case number (if known) | |
|-----|-----------------------|---|--|--|
| 14. | did not No Yes | ner personal and household items you did not a list . Give specific rmation | already list, including any health aids you | |
| 15. | | dollar value of all of your entries from Part 3, | including any entries for pages you have | \$6,200.00 |
| Pa | art 4: | Describe Your Financial Assets | | |
| Do | ou own | or have any legal or equitable interest in any o | of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | | es: Money you have in your wallet, in your home, petition | in a safe deposit box, and on hand when you file your | |
| | □ No ✓ Yes | | Cash: | . \$4,000.00 |
| 17. | • | es: of money es: Checking, savings, or other financial account brokerage houses, and other similar institution institution, list each. | s; certificates of deposit; shares in credit unions, ns. If you have multiple accounts with the same | |
| | □ No | | | |
| | ∀ Yes | Institution name: | | |
| | 17 | 1. Savings account: Savings account | nt CHASE | \$526.00 |
| 18. | Exampl No | mutual funds, or publicly traded stocks es: Bond funds, investment accounts with broker | age firms, money market accounts | |
| 19. | - | blicly traded stock and interests in incorporate | ed and unincorporated businesses, including | |
| | ✓ No ☐ Yes info | . Give specific rmation about | % of ownership: | |
| 20. | Govern Negotia | mName of entity: ment and corporate bonds and other negotiable instruments include personal checks, cashiers gotiable instruments are those you cannot transfe | le and non-negotiable instruments s' checks, promissory notes, and money orders. | |
| | info | . Give specific rmation about nlssuer name: | | |
| 21. | | nent or pension accounts es: Interests in IRA, ERISA, Keogh, 401(k), 403(b profit-sharing plans | b), thrift savings accounts, or other pension or | |
| | _ | . List each ount separately. Type of account: Institut | ion name: | |

| Deb | tor 1 | Everaldo Marmolejo | Case numb | er (if known) | |
|-----|------------------|--|---|-------------------------|---|
| 22. | Your st Examp | | nade so that you may continue service or use from id rent, public utilities (electric, gas, water), telecor | | |
| | ✓ No | S | Institution name or individual: | | |
| 22 | _ | | | umbor of vooro) | |
| 23. | ☑ No | | payment of money to you, either for life or for a nu | mber or years) | |
| 24. | Interes | | nt in a qualified ABLE program, or under a qual | ified state tuition pro | gram. |
| | ✓ No ☐ Ye | | and description. Separately file the records of any | interests. 11 U.S.C. | § 521(c) |
| 25. | | , equitable or future interests in pro s exercisable for your benefit | perty (other than anything listed in line 1), and r | ights or | |
| | _ | s. Give specific ormation about them | | | |
| 26. | | | rets, and other intellectual property; proceeds from royalties and licensing agreement | s | |
| | | s. Give specific ormation about them | | | |
| 27. | Examp | • • | tangibles es, cooperative association holdings, liquor licens | es, professional licens | ses |
| | | s. Give specific ormation about them | | | |
| Mor | ney or p | roperty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax re | funds owed to you | | | |
| | □ No | | | | |
| | ✓ Ye | s. Give specific information Federa | l: Tax refund. Amt: \$1,000.00 | Federal | \$1,000.00 |
| | | out them, including whether u already filed the returns | | State: | \$0.00 |
| | an | d the tax years | | Local: | \$0.00 |
| 29. | Examp | | pousal support, child support, maintenance, divorc | e settlement, property | settlement |
| | ✓ No | s. Give specific information | | Alimony: | |
| | ⊔ те | s. Give specific information | | Maintenance: | |
| | | | | Support: | |
| | | | | Divorce settlement: | |
| | | | | Property settlement | |

| Debt | or 1 Everaldo Marmolejo | Case number (if known) | |
|------|---|--|---|
| 30. | Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability be compensation, Social Security benefits; unpaid loans you | | |
| | ✓ No✓ Yes. Give specific information | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; health savings account | t (HSA); credit, homeowner's, or renter's in | surance |
| | ✓ No Yes. Name the insurance company of each policy and list its value Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from someone who has d If you are the beneficiary of a living trust, expect proceeds from a life entitled to receive property because someone has died | | |
| | ✓ No✓ Yes. Give specific information | | |
| 33. | Claims against third parties, whether or not you have filed a laws Examples: Accidents, employment disputes, insurance claims, or right | | |
| | ✓ No Yes. Describe each claim | | |
| 34. | Other contingent and unliquidated claims of every nature, including rights to set off claims | ng counterclaims of the debtor and | |
| | ✓ No Yes. Describe each claim | | |
| 35. | Any financial assets you did not already list | | |
| | ✓ No☐ Yes. Give specific information | | |
| 36. | Add the dollar value of all of your entries from Part 4, including a attached for Part 4. Write that number here | | \$5,526.00 |
| Pa | rt 5: Describe Any Business-Related Property You C | own or Have an Interest In. List a | nny real estate in Part 1. |
| 37. | Do you own or have any legal or equitable interest in any business | ss-related property? | |
| | No. Go to Part 6. ✓ Yes. Go to line 38. | | |
| | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accounts receivable or commissions you already earned | | |
| | ☐ No ☐ Yes. Describe Accounts rec. or commissions you alrea | ady earned | \$0.00 |
| 39. | Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, desks, chairs, electronic devices | copiers, fax machines, rugs, telephones, | |
| | No ✓ Yes. Describe Office Equipment | | \$400.00 |

| Deb | tor 1 | Everaldo Marmolejo | Case number (if known) | |
|-----|-----------------------------|---|--------------------------|---|
| 40. | Machin | ery, fixtures, equipment, supplies you use in business, and tools of your | trade | |
| | □ No ✓ Yes | s. Describe Tools of Trade, carpenter tools | | \$9,400.00 |
| 41. | Invento | ry | | |
| | □ No ✓ Yes | s. Describe Inventory, wood, paints, stains, fittings | | \$2,500.00 |
| 42. | Interes | ts in partnerships or joint ventures | | |
| | ✓ No ☐ Yes | s. Describe Name of entity: | % of ownership: | |
| 43. | Custon | ner lists, mailing lists, or other compilations | | |
| | ✓ No ☐ Yes | s. Do your lists include personally identifiable information (as defined in No Yes. Describe | 11 U.S.C. § 101(41A))? | |
| 44. | Any bu | siness-related property you did not already list | | |
| | □ No ✓ Yes | s. Give specific information. | | |
| | Pa | artly-finished orders, payment not due until shipped. | | \$7,000.00 |
| 45. | | e dollar value of all of your entries from Part 5, including any entries for p d for Part 5. Write that number here | | \$19,300.00 |
| Pa | | Describe Any Farm- and Commercial Fishing-Related Properly 15 you own or have an interest in farmland, list it in Part 1. | erty You Own or Have ar | Interest In. |
| 46. | Do you | own or have any legal or equitable interest in any farm- or commercial fi | ishing-related property? | |
| | | Go to Part 7. Go to line 47. | | |
| | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm a Example No No Yes | es: Livestock, poultry, farm-raised fish | | · |
| 48. | Crops- | either growing or harvested | | |
| | | s. Give specific | | |
| 49. | Farm a | nd fishing equipment, implements, machinery, fixtures, and tools of trade | e | |
| | ✓ No | i | | |
| 50. | Farm a | nd fishing supplies, chemicals, and feed | | |
| | ✓ No ☐ Yes | i | | |

| Deb | or 1 Everaldo Marmolejo | Case nu | umber (if known) | | | | | |
|-----|--|-----------------|------------------------------|---|-------------|--|--|--|
| 51. | Any farm- and commercial fishing-related property you did not No Yes. Give specific information | ot already list | | | | | | |
| 52. | Add the dollar value of all of your entries from Part 6, including attached for Part 6. Write that number here | • | \$0.00 | | | | | |
| Pa | Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above | | | | | | | |
| 53. | Do you have other property of any kind you did not already li Examples: Season tickets, country club membership | st? | | | | | | |
| | ✓ No✓ Yes. Give specific information. | | | | | | | |
| 54. | Add the dollar value of all of your entries from Part 7. Write t | ·[| \$0.00 | | | | | |
| Pá | rt 8: List the Totals of Each Part of this Form | | | | | | | |
| 55. | Part 1: Total real estate, line 2 | | | · | \$0.00 | | | |
| 56. | Part 2: Total vehicles, line 5 | \$7,257.00 | | | | | | |
| 57. | Part 3: Total personal and household items, line 15 | \$6,200.00 | | | | | | |
| 58. | Part 4: Total financial assets, line 36 | \$5,526.00 | | | | | | |
| 59. | Part 5: Total business-related property, line 45 | \$19,300.00 | | | | | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | | | | | |
| 61. | Part 7: Total other property not listed, line 54 | +\$0.00 | | | | | | |
| 62. | Total personal property. Add lines 56 through 61 | \$38,283.00 | Copy personal property total | + | \$38,283.00 | | | |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62. | | | | \$38,283.00 | | | |

| First Debtor 2 (Spouse, if filing) First United States Bankrup Case number (if known) Official Form 100 Schedule C: Th Be as complete and acc Using the property you li space is needed, fill out write your name and cas For each item of prope is to state a specific do exempted up to the am receive certain benefits exemption of 100% of f property is determined | e Property You Courate as possible. If two mosted on Schedule A/B: Property and attach to this page as e number (if known). Try you claim as exempt, sollar amount as exempt, ount of any applicable story, and tax-exempt retirement. | Claim as Exempoperty (Official Form 100 many copies of Part 2 you must specify the Alternatively, you may tatutory limit. Some expent fundsmay be unliaw that limits the exe | toget 6A/B) amout clair kemptilimite | her, both are equally reas your source, list the ditional Page as necessant of the exemption year the full fair market stionssuch as those d in dollar amount. For to a particular doll | lowever, if you claim an lar amount and the value of the |
|---|--|--|---|---|---|
| Debtor 2 (Spouse, if filing) First United States Bankrup Case number (if known) Official Form 100 Schedule C: Th Be as complete and acc Using the property you li space is needed, fill out write your name and cas For each item of prope is to state a specific do exempted up to the am receive certain benefits exemption of 100% of f property is determined | Name Middle Naticy Court for the: WESTE COC Property You Courage as a possible. If two mosted on Schedule A/B: Property and attach to this page as a number (if known). Try you claim as exempt, allar amount as exempt, ount of any applicable story, and tax-exempt retiremair market value under a | Claim as Exempoperty (Official Form 100 many copies of Part 2 you must specify the Alternatively, you may tatutory limit. Some expent fundsmay be unliaw that limits the exe | toget 6A/B) amou clair kempti | her, both are equally reas your source, list the ditional Page as necessant of the exemption year the full fair market stionssuch as those d in dollar amount. For to a particular doll | amended filing 04/16 esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the |
| United States Bankrup Case number (if known) Official Form 100 Schedule C: Th Be as complete and acc Using the property you li space is needed, fill out write your name and cas For each item of prope is to state a specific do exempted up to the am receive certain benefits exemption of 100% of f property is determined | e Property You Courate as possible. If two mosted on Schedule A/B: Property and attach to this page as e number (if known). Try you claim as exempt, sollar amount as exempt, ount of any applicable story, and tax-exempt retiremair market value under a | Claim as Exemple are filing operty (Official Form 100 many copies of Part 2 you must specify the Alternatively, you may tatutory limit. Some expent fundsmay be unliaw that limits the exe | toget 6A/B) amou clair kempti | her, both are equally reas your source, list the ditional Page as necessant of the exemption year the full fair market stionssuch as those d in dollar amount. For to a particular doll | amended filing 04/16 esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the |
| Case number (if known) Official Form 100 Schedule C: Th Be as complete and acc Using the property you lispace is needed, fill out write your name and cas For each item of prope is to state a specific do exempted up to the am receive certain benefits exemption of 100% of the property is determined. | e Property You Curate as possible. If two mosted on Schedule A/B: Property and attach to this page as enumber (if known). Try you claim as exempt, allar amount as exempt, ount of any applicable story, and tax-exempt retirematir market value under a | claim as Exemple are filing operty (Official Form 100 many copies of Part 2 you must specify the Alternatively, you may tatutory limit. Some expent fundsmay be unliaw that limits the exe | toget 6A/B) amou clair kempti | her, both are equally reas your source, list the ditional Page as necessant of the exemption year the full fair market stionssuch as those d in dollar amount. For to a particular doll | amended filing 04/16 esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the |
| (if known) Official Form 100 Schedule C: Th Be as complete and acc Using the property you li space is needed, fill out write your name and cas For each item of prope is to state a specific do exempted up to the am receive certain benefits exemption of 100% of f property is determined | urate as possible. If two mested on Schedule A/B: Program and attach to this page as e number (if known). The you claim as exempt, allar amount as exempt, ount of any applicable story, and tax-exempt retiremater market value under a | narried people are filing operty (Official Form 100 many copies of Part 2 you must specify the Alternatively, you may tatutory limit. Some expent fundsmay be unlaw that limits the exe | toget 6A/B) 2: Add amou clair cemp limite emptio | as your source, list the ditional Page as necessant of the exemption you the full fair market tions-such as those d in dollar amount. For to a particular dollar | esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the |
| Schedule C: The Be as complete and acc Using the property you li space is needed, fill out write your name and cas For each item of prope is to state a specific do exempted up to the am receive certain benefits exemption of 100% of f property is determined | urate as possible. If two mested on Schedule A/B: Program and attach to this page as e number (if known). The you claim as exempt, allar amount as exempt, ount of any applicable story, and tax-exempt retiremater market value under a | narried people are filing operty (Official Form 100 many copies of Part 2 you must specify the Alternatively, you may tatutory limit. Some expent fundsmay be unlaw that limits the exe | toget 6A/B) 2: Add amou clair cemp limite emptio | as your source, list the ditional Page as necessant of the exemption you the full fair market tions-such as those d in dollar amount. For to a particular dollar | esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the |
| Be as complete and acc Using the property you li space is needed, fill out write your name and cas For each item of prope is to state a specific do exempted up to the am receive certain benefits exemption of 100% of f property is determined | urate as possible. If two m sted on Schedule A/B: Pro and attach to this page as e number (if known). rty you claim as exempt, illar amount as exempt. ount of any applicable st s, and tax-exempt retirem air market value under a | narried people are filing operty (Official Form 100 many copies of Part 2 you must specify the Alternatively, you may tatutory limit. Some expent fundsmay be unlaw that limits the exe | toget 6A/B) 2: Add amou clair cemp limite emptio | as your source, list the ditional Page as necessant of the exemption you the full fair market tions-such as those d in dollar amount. For to a particular dollar | esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the |
| Using the property you li space is needed, fill out write your name and case. For each item of prope is to state a specific do exempted up to the am receive certain benefits exemption of 100% of the property is determined. | sted on Schedule A/B: Pro and attach to this page as e number (if known). rty you claim as exempt, illar amount as exempt. ount of any applicable st s, and tax-exempt retirem air market value under a | you must specify the Alternatively, you may tatutory limit. Some expent funds—may be unlike that limits the executive property. | 6A/B) 2: Add amou clair xemp limite | as your source, list the ditional Page as necessant of the exemption you the full fair market tions-such as those d in dollar amount. For to a particular dollar | e property that you claim as exempt. If more essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the |
| property is determined | | | - | • | |
| Part 1: Identify | | • | De III | nited to the applicab | ic statutory amount. |
| identily | the Property You C | claim as Exempt | | | |
| 1. Which set of exem | ptions are you claiming? | ? Check one only, | even | if your spouse is filing | with you. |
| _ | ng state and federal nonba | | 11 U. | S.C. § 522(b)(3) | |
| You are claimi | ng federal exemptions. 11 | 1 U.S.C. § 522(b)(2) | | | |
| 2. For any property y | ou list on Schedule A/B | that you claim as exer | npt, f | ill in the information | below. |
| Brief description of the Schedule A/B that lists | | Current value of the portion you own | | ount of the mption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | | ck only one box for h exemption | |
| Brief description: | | \$2,300.00 | | \$0.00 | 11 U.S.C. § 522(d)(5) |
| 2001 Chevy Silverad | 0 | | | 100% of fair market | o o o o o o o |
| Line from Schedule A/B. | 3.1 | | | value, up to any applicable statutory limit | |
| Brief description: | | \$4,957.00 | $\overline{\mathbf{Q}}$ | \$3,775.00 | 11 U.S.C. § 522(d)(2) |
| 2008 Dodge Charger Line from <i>Schedule A/B.</i> | | | | 100% of fair market value, up to any applicable statutory limit | |
| • | a homestead exemption of ent on 4/01/19 and every 3 | | ses fil | | |

| Debtor 1 | Everaldo Marmolejo | Case number (if known) |
|----------|--------------------|---------------------------------------|
| | <u></u> | · · · · · · · · · · · · · · · · · · · |

| Part 2: Additional Page | | | |
|--|--|---|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: Household goods & furnishings Line from <i>Schedule A/B</i> :6 | \$3,500.00 | \$3,500.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) |
| Brief description: Electronics | \$1,500.00 | \$1,500.00 | 11 U.S.C. § 522(d)(3) |
| Line from Schedule A/B:7 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Equipment for sports and hobbies Line from <i>Schedule A/B</i> :9 | \$400.00 | \$400.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| Brief description: Clothes Line from Schedule A/B:11 | \$300.00 | \$300.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3) |
| Brief description: Jewelry Line from Schedule A/B:12 | \$500.00 | \$500.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(4) |
| Brief description: Cash Line from Schedule A/B:16 | \$4,000.00 | \$4,000.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| Brief description: Savings account CHASE Line from Schedule A/B: | \$526.00 | \$526.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| Brief description: Tax refund Line from <i>Schedule A/B</i> : 28 | \$1,000.00 | \$1,000.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |
| Brief description: Accounts rec. or commissions you already earned Line from Schedule A/B:38 | \$0.00 y | \$0.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) |

| Debtor 1 | Everaldo Marmolejo | Case number (if known) | | | | |
|---|--|--|---|------------------------------------|--|--|
| Part 2: | Additional Page | | | | | |
| | ption of the property and line on /B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | | | |
| Brief descrip Office Equ Line from <i>Sc</i> | | \$400.00 | \$400.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) | | |
| | rade, carpenter tools shedule A/B: 40 | \$9,400.00 | \$6,774.00 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(5) | | |

abla

 $\sqrt{}$

limit

limit

\$0.00

100% of fair market value, up to any

applicable statutory

\$0.00

100% of fair market

value, up to any applicable statutory

11 U.S.C. § 522(d)(5)

11 U.S.C. § 522(d)(5)

\$2,500.00

\$7,000.00

Brief description:

Brief description:

until shipped.

Inventory, wood, paints, stains, fittings

Partly-finished orders, payment not due

Line from Schedule A/B: 41

Line from Schedule A/B: 44

| Fill in this inf | ormation to iden | tify your case | : | | | |
|--|----------------------------|------------------|--|-------------------------|--------------------|--------------------------------------|
| Debtor 1 | Everaldo | NO LUI NI | Marmolejo | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| United States Bar | nkruptcy Court for the | : WESTERN DIS | STRICT OF TEXAS | | | |
| Case number | | | | | ☐ Check if this is | s an |
| (if known) | | | | | amended filing | g |
| Official Form | 106D | | | | | |
| Schedule D: | Creditors Wh | no Have Cla | ims Secured b | y Property | | 12/15 |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 1. List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim Column C Unsecured portion If any | | | | | | is form. Column C Unsecured portion |
| 2.1 | | secures the | e property that claim: | \$5,925.78 | \$7,000.00 | |
| Shizoom, LLC Creditor's name | | — Partly-finis | hed orders, | | | |
| c/o Joseph I. Su | ssman, | payment no | ot due until ship | | | |
| Number Street 333 Pearshall Av | ve Suite 205 | | | | | |
| | | | te you file, the claim is | : Check all that apply. | | |
| Codorburat | NV 11516 | Continge | | | | |
| Cedarhurst City | NY 11516 State ZIP Code | Unliquida | | | | |
| Who owes the deb | ot? Check one. | | n. Check all that apply | | | |
| Debtor 1 only | | | ement you made (such a | | car loan) | |
| Debtor 2 only Debtor 1 and D | Nehtor 2 only | _ | lien (such as tax lien, n | nechanic's lien) | | |
| | the debtors and anoth | her 📛 🚓 " | nt lien from a lawsuit | | | |
| _ 0 | | Other (in Secure | cluding a right to offset) d | | | |
| to a communit | | 233410 | | | | |
| Date debt was inc | urred | Last 4 digits | of account number | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$5,925.78

| Debtor 1 Everaldo Marmolejo | Everaldo Marmolejo | | | Case number (if known) | | | |
|---|--|--|---|-----------------------------------|--|--|--|
| Additional Page Part 1: After listing any entries sequentially from the process. | on this page, number them revious page. | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | | |
| Z.2 Texas Workforce Commission Creditor's name Regulatory Integrity Division Number Street 101 E 15th St | Describe the property that secures the claim: — Secured — As of the date you file, the claim is: | \$3,478.00 Check all that apply. | \$0.00 | \$3,478.00 | | | |
| Austin TX 78778 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anote Check if this claim relates | Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, much as Judgment lien from a lawsuit Other (including a right to offset) Taxes | | car loan) | | | | |
| to a community debt Date debt was incurred | Last 4 digits of account number | | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$3,478.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$9,403.78

Umemployeed Taxes

| | | | | | _ | | | |
|--|---|--|--|--|--------------------------------|--|--|----------------------------------|
| Fill in this inf | ormation to i | dentify your | case | : | | | | |
| Debtor 1 | Everaldo | | | Marmolejo | 7 | | | |
| | First Name | Middle Name | Э | Last Name | | | | |
| Debtor 2 | | | | | . | | | |
| (Spouse, if filing) | First Name | Middle Name | Э | Last Name | | | | |
| United States Bar | nkruptcy Court fo | or the: WESTER | N DIS | STRICT OF TEXAS | | | | |
| Case number (if known) | | | | | | | Check if this is a amended filing | an |
| Official Form | 106E/F | | | | | | | |
| Schedule E/ | F: Credito | rs Who Hav | /e U | nsecured Claims | | | | 12/15 |
| on Schedule A/B: Do not include any If more space is n to this page. On t | Property (Officing creditors with eeded, copy the hetop of any ac | ial Form 106A/B) partially secure Part you need, | and of the design of the desig | or unexpired leases that coun Schedule G: Executory Comes that are listed in Schedule out, number the entries in the your name and case number ured Claims | ontract le D: Cr e boxes | s and Unexpire reditors Who H s on the left. A | ed Leases (Officia old Claims Secur | l Form 106G). ed by Property. |
| 1. Do any credit | ors have priorit | y unsecured cla | ims a | gainst you? | | | | |
| ☐ No. Go t | | • | | • | | | | |
| ✓ Yes. | | | | | | | | |
| claim. For each show both price more space is | | | | | | | | |
| (For an explar | nation of each typ | oe of claim, see th | he inst | tructions for this form in the ins | struction | booklet. | | |
| | | | | | ٦ | Total claim | Priority amount | Nonpriority amount |
| 2.1 | | | | | | \$1,586.15 | \$856.50 | \$729.65 |
| Internal Revenu | | | _ lac | st 4 digits of account number | . – | | | |
| Priority Creditor's Nam Centralized Inso | | tions | | en was the debt incurred? | | | | |
| Number Street | , ., . | | _ *** | ien was the dept incurred: | 2015 | | _ | |
| PO Box 7346 | | | _ As | of the date you file, the claim | n is: Ch | eck all that app | oly. | |
| | | | - 님 | Contingent Unliquidated | | | | |
| Philadelphia City | PA State | 19101-7346 ZIP Code | - 님 | Disputed | | | | |
| Who incurred the | | | Tvi | pe of PRIORITY unsecured cl | aim: | | | |
| Debtor 1 only | | | n n | Domestic support obligations | | | | |
| Debtor 2 only Debtor 1 and D | ehtor 2 only | | ₫ | Taxes and certain other debts | - | - | ent | |
| | the debtors and | another | Ц | Claims for death or personal i intoxicated | injury W | rille you were | | |
| | laim is for a co | mmunity debt | | Other. Specify | | | | |
| Is the claim subject | ct to offset? | | | | | | | |
| ✓ No ☐ Yes | | | | | | | | |

Debtor 1 Everaldo Marmolejo Case number (if known) Part 1: Your PRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim Priority** Nonpriority amount amount previous page. 2.2 \$5,000.00 \$0.00 \$5,000.00 Texas Comptroller Last 4 digits of account number Priority Creditor's Name Revenue Accounting Division Bankruptcy When was the debt incurred? PO Box 13528 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Austin TX 78711 Disputed City State ZIP Code Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only ☐ Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ✓ No ☐ Yes 2015-2016 2.3 \$3,478.00 \$3,478.00 \$0.00 **Texas Workforce Commission** Last 4 digits of account number Priority Creditor's Name **Regulatory Integrity Division** When was the debt incurred? Number Street 101 E 15th St As of the date you file, the claim is: Check all that apply. Contingent Unliquidated TX 78778 Austin Disputed City State ZIP Code Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only ☐ Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated ☐ Check if this claim is for a community debt Other. Specify

Is the claim subject to offset?

✓ No Yes2013-2014

Debtor 1 **Everaldo Marmolejo** Case number (if known) Part 1: Your PRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim Priority Nonpriority** previous page. amount amount 2.4 \$2,390.00 \$2,390.00 \$0.00 Watson Law Firm, P.C. Last 4 digits of account number Priority Creditor's Name 1123 E. Rio Grande When was the debt incurred? 03/29/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquida
Disputed El Paso 79902 TX City State ZIP Code Type of PRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only ■ Domestic support obligations Debtor 2 only
Debtor 1 and Debtor 2 only
At least one of the debtors and another Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify $\overline{\mathbf{A}}$ Attorney fees for this case Is the claim subject to offset? ✓ No ☐ Yes

| Debtor 1 Everaldo Marmolejo | Case number (if known) |
|--|--|
| Part 2: List All of Your NONPRIORITY | / Unsecured Claims |
| Yes List all of your nonpriority unsecured claims in If a creditor has more than one nonpriority unsecutype of claim it is. Do not list claims already inclu | Submit this form to the court with your other schedules. In the alphabetical order of the creditor who holds each claim. Bured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in esecured claims, fill out the Continuation Page of Part 2. Total claim \$5,973.44 |
| Albuquerque Hardwood Lumper CO, INC Nonpriority Creditor's Name C/O Elizabeth L. German Number Street German & Associates, LLC 11728 Linn Avenue, NE Albuquerque NM 87123 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset? No Yes | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unsecured |
| Atlas Logistics Nonpriority Creditor's Name 1212 S. George Road Number Street Evansville IN 47711 City State ZIP Code Who incurred the debt? Check one. IV Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | \$14,000.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unsecured |
| s the claim subject to offset? ☑ No ☐ Yes | |

| Debtor 1 Everaldo Marmolejo | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsec | cured Claims Continuation Page | |
| After listing any entries on this page, number t previous page. | hem sequentially from the | Total claim |
| 4.3 | | \$423.00 |
| Capital One | Last 4 digits of account number 1 4 2 4 | |
| Nonpriority Creditor's Name Attn: General Correspondence/Bankrupto | When was the debt incurred? 05/14/2015 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 30285 | ☐ Contingent ☐ Unliquidated | |
| | Disputed | |
| Salt Lake City UT 84130 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community deb | | |
| Is the claim subject to offset? | | |
| ☑ No ☐ Yes | | |
| | | |
| 4.4 | | \$500.00 |
| Check N Go Nonpriority Creditor's Name | Last 4 digits of account number | |
| 1461 N. Lee Trevino | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | ☐ Contingent ☐ Unliquidated | |
| El Page TV 70026 | Disputed | |
| El Paso TX 79936 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community deb | Unsecured | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| | | |
| 4.5 | | \$0.00 |
| CitiCards Private Label Nonpriority Creditor's Name | Last 4 digits of account number 1 4 4 1 | |
| Citicorp Cr Srvs/Centralized Bankruptcy | When was the debt incurred? 06/04/2006 | |
| Number Street PO Box 790040 | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Unliquidated | |
| St Louis MO 63129 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | ☐ Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debi | Charge Account | |
| Is the claim subject to offset? No | | |
| ☑ No ☐ Yes | | |

| Debtor 1 Everaldo Marmolejo | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | ured Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim |
| 4.6 | | \$775.00 |
| Coastal Pay | Last 4 digits of account number | |
| Nonpriority Creditor's Name 2445 Impala Dr. | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| | Unliquidated | |
| Carlsbad CA 92010 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ✓ Other. Specify | |
| Check if this claim is for a community debt | Unsecured | |
| Is the claim subject to offset? | | |
| ✓ No ☐ Yes | | |
| | | |
| 4.7 | | \$0.00 |
| Estes Express Lines | Last 4 digits of account number | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| 1130 Vista De Oro Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| | Unliquidated | |
| El Paso TX 79935 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | ☐ Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | Unsecured | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| | | |
| 4.8 | | \$2,405.00 |
| First Data | Last 4 digits of account number 0 0 0 0 | |
| Nonpriority Creditor's Name 5565 Glenridge | When was the debt incurred? 09/01/2014 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Connector NE Ste 2000 | Contingent | |
| | ☐ Unliquidated ☐ Disputed | |
| Atlanta GA 30342 | | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | Lease | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| 1 1 2 2 2 | | |

| Debtor 1 Everaldo Marmolejo | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.9 | | \$700.00 |
| First Premier Bank | _ Last 4 digits of account number0_ 4_ 2_ 3_ | |
| Nonpriority Creditor's Name 601 S Minneaplois Ave | When was the debt incurred? 08/30/2015 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | □ Contingent □ Unliquidated | |
| | ☐ Unliquidated ☐ Disputed | |
| Dious FDalls SD 57104 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans Obligations arising out of a congration agreement or diverse | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ☑ Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? No | | |
| ✓ No Yes | | |
| | | |
| 4.10 | | \$12,136.00 |
| Fox Capital Group | Last 4 digits of account number | |
| Nonpriority Creditor's Name c/o Jeffrey R. Hennen | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Cohen, Roberts, & Associates, LLC | _ Contingent | |
| 1284 SOM Center Rd, Ste. 338 | ☐ Unliquidated ☐ ☐ Disputed | |
| Cleveland OH 44124 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ☑ Other. Specify | |
| ☐ Check if this claim is for a community debt | Unsecured | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| | | |
| 4.11 | | \$0.00 |
| IRS Insolvecy Office | Last 4 digits of account number | |
| Nonpriority Creditor's Name 300 E. 8th Street, Mail Stop 502AUS | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| Austin TX 78701 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | Unsecured | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| 1 1 100 | | |

| Lveraldo Marmolejo | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.12 | | \$4,521.26 |
| NCB Management Services, INC | Last 4 digits of account number | <u> </u> |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| PO Box 1099 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ ☐ Contingent | |
| | Unliquidated | |
| Langhorne PA 19047 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | ☐ Student loans | |
| ☑ Debtor 1 only ☐ Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Unsecured | |
| s the claim subject to offset? | | |
| √ No | | |
| Yes | | |
| 413 | | |
| 4.13 | | (\$1.00) |
| Office of the Atty General/Child Support Nonpriority Creditor's Name | _ Last 4 digits of account number 9 7 7 5 | |
| Attn: Bankruptcy | When was the debt incurred? 06/17/2007 | |
| Number Street PO Box 12017 | As of the date you file, the claim is: Check all that apply. | |
| FO BOX 12017 | _ | |
| | □ Unliquidated □ Disputed | |
| Austin TX 78711 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ☑ Other. Specify | |
| ☐ Check if this claim is for a community debt | Child Support | |
| s the claim subject to offset? | | |
| ☑ No □ Yes | | |
| | | |
| 4.14 | | \$0.00 |
| Pioneer Bank | Last 4 digits of account number | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| PO Box 972178 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ ☐ Contingent | |
| | Unliquidated | |
| El Paso TX 79905 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | ☐ Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Check if this claim is for a community debt | ✓ Other. Specify Unsecured | |
| s the claim subject to offset? | - Tiosourou | |
| ✓ No | | |
| Yes | | |

| Debtor 1 Everaldo Marmolejo | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unse | ecured Claims Continuation Page | |
| After listing any entries on this page, number previous page. | them sequentially from the | Total claim |
| 4.15 | | \$3,058.00 |
| Square | Last 4 digits of account number | |
| Nonpriority Creditor's Name 1455 Market Square #600 | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| | Unliquidated Disputed | |
| San Francisco CA 94103 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community de | Unsecured Unsecured | |
| Is the claim subject to offset? | | |
| ✓ No Yes | | |
| | | |
| 4.16 | | \$0.00 |
| Syncb/care Credit | Last 4 digits of account number 7 5 9 1 | |
| Nonpriority Creditor's Name Po Box 965036 | When was the debt incurred? 06/16/2006 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent Unliquidated | |
| | Disputed | |
| Orlando FL 32896 City State ZIP Code | <u> </u> | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Check if this claim is for a community de | | |
| Is the claim subject to offset? | Charge Account | |
| ✓ No | | |
| Yes | | |
| 4.17 | | \$0.00 |
| Synchrony Bank/ JC Penneys | Last 4 digits of account number 4 4 0 7 | Ψ0.00 |
| Nonpriority Creditor's Name | When was the debt incurred? 06/21/1995 | |
| Attn: Bankruptcy Number Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 956060 | Contingent | |
| | Unliquidated | |
| Orlando FL 32896 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community de | bt Charge Account | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |

| Everaido Marmolejo | Case number (if known) | |
|---|---|-----------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.18 | | \$0.00 |
| Tittle Max | Last 4 digits of account number | |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | □ Unliquidated □ □ Disputed | |
| El Paso TX 79938 | | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans Obligations origing out of a congration agreement or divorce | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | Other. Specify | |
| Is the claim subject to offset? | Unsecured | |
| No No | | |
| Yes | | |
| 4.19 | | \$000.54 |
| Transworld System, INC | Last 4 digits of account number | \$669.54 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| Po Box 17221 Number Street | As of the date you file, the claim is: Check all that apply. | |
| Number Street | Contingent | |
| | Unliquidated | |
| Wilmington DE 19850 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | Unsecured | |
| Is the claim subject to offset? | | |
| ✓ No ☐ Yes | | |
| | | |
| 4.20 | | \$5,365.00 |
| Wills Fargo, LLC | Last 4 digits of account number | |
| Nonpriority Creditor's Name c/o Timonthy H. Hopkins Groom & Cave, LL | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| 1570 The Alameda Suite 100 | _ | |
| | Disputed | |
| San Jose CA 95126 City State ZIP Code | Turns of NONDRIORITY unreserved eleiter | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | | |
| Is the claim subject to offset? | onsecul eu | |
| No No | | |
| Yes | | |

| Everaido Marmolejo | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY U | Unsecured Claims Continuation Page | |
| After listing any entries on this page, nur previous page. | mber them sequentially from the | Total claim |
| 4.21 | | \$0.00 |
| Worldmrk Exp | Last 4 digits of account number 0 4 1 4 | · |
| Nonpriority Creditor's Name | When was the debt incurred? 03/14/2015 | |
| 10750 W Charleston Blvd Number Street | As of the date you file, the claim is: Check all that apply. | |
| Trained Check | Contingent | |
| | Unliquidated | |
| Las Vegas NV 89135 | Disputed | |
| Las Vegas NV 89135 City State ZIP Coo | <u>- </u> | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a communit | | |
| Is the claim subject to offset? | Time Shared Loan | |
| No No | | |
| Yes | | |
| | | |
| 4.22 | | \$2,613.66 |
| XPO Logistics, LLC | Last 4 digits of account number | |
| Nonpriority Creditor's Name c/o Susan M. Forbes | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| 711 Myrthe | Contingent | |
| | Unliquidated Disputed | |
| El Paso TX 79901 | <u>1</u> | |
| City State ZIP Coo Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a communit | | |
| Is the claim subject to offset? | | |
| No You | | |
| Yes | | |

| Debtor 1 | Everaldo Marmolejo | Case number (if known) |
|----------|---|------------------------|
| Part 3: | List Others to Be Notified About a Debt That You Alread | dy Listed |

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| United States Attor | rney | | On which entry in Part 1 or Part 2 did you list the original creditor? |
|---|-------------|-----------------------|--|
| Civil Process Clerk Number Street 601 N.W. Loop 410 | | | Line of (Check one): Notice Only for Internal Revenue Service Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| San Antonio City | TX State | 78216 ZIP Code | Last 4 digits of account number |
| United States Attor | rney | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name Civil Process Clerk Number Street 601 N.W. Loop 410 | | | Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| San Antonio | TX State | 78216 ZIP Code | Last 4 digits of account number |

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|-----------------------------|-----|---|-------------------------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$10,064.15 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. + | \$2,390.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$12,454.15 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | ^{6i.} - | \$53,138.90 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$53,138.90 |

| Fill in this inf | ormation to i | dentify your case | | | |
|---------------------|-------------------------|-------------------------|------------------------|---|------|
| Debtor 1 | Everaldo | | Marmolejo | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court fo | or the: WESTERN DIS | STRICT OF TEXAS | s | |
| Case number | | | | | |
| (if known) | | | | Check if this is an | |
| | | | | amended filing | |
| Official Form | 106G | | | | |
| Schodulo G | · Evecutor | y Contracts and | d Unavaired I | Lossos | |
| | | | | | |
| □ No. Che | eck this box and f | | urt with your other so | chedules. You have nothing else to report on this form. | |
| ✓ Yes. Fill | in all of the infor | mation below even if th | e contracts or leases | s are listed on Schedule A/B: Property (Official Form 106A | /B). |
| is for (for exa | • | cle lease, cell phone). | • | ntract or lease. Then state what each contract or lease is for this form in the instruction booklet for more examples | of |
| Person or | company with | whom you have the co | ontract or lease | State what the contract or lease is for | |
| 2.1 Juan Bei | na Videz | | | Juan Bena Videz | |
| Name 12210 Pa | ound Dance Be | 1 Sto A | | Contract to be ASSUMED | |
| | ound Dance Ro Street | ı, sie A | | _ | |
| | | | | <u> </u> | |
| El Paso | | TX | 79938 | | |
| City | | State | ZIP Code | _ | |

| Eill f | n this inf | ormation to i | dentify your case | | | | | | | |
|--------------|--|-------------------|-------------------------|-----------------------------------|---|------|--|--|--|--|
| Debto | | Everaldo | dentity your oase | Marmolejo | | | | | | |
| 505.0 | . · | First Name | Middle Name | Last Name | | | | | | |
| Debto | | | | | | | | | | |
| (Spot | use, if filing) | First Name | Middle Name | Last Name | | | | | | |
| Unite | d States Ba | nkruptcy Court fo | or the: WESTERN DIS | STRICT OF TEXAS | | | | | | |
| | number | | | | | | | | | |
| (if kno | | - | | | Check if this is an | | | | | |
| | | | | | amended filing | | | | | |
| | | | | | | | | | | |
| Offic | ial Form | <u> 106H</u> | | | | | | | | |
| Sche | edule H | : Your Cod | ebtors | | 1 | 2/1 | | | | |
| 1. De | | any codebtors? | (If you are filing a jo | int case, do not list either spou | ise as a codebtor.) | | | | | |
| | | | • | | y? (Community property states and territories xas, Washington, and Wisconsin.) | | | | | |
| | No. Go | | | | _ | | | | | |
| \checkmark | . | d your spouse, fo | rmer spouse, or legal e | quivalent live with you at the ti | me? | | | | | |
| | ✓ No ☐ Yes | • | | | | | | | | |
| pe cr | In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. | | | | | | | | | |
| | Column 1: | Your codebtor | | | Column 2: The creditor to whom you owe the de | ebt: | | | | |
| | | | | | Check all schedules that apply: | | | | | |

| F | ill in this inform | ation to i | dentify | your case: | | | | | | | | | |
|---|---|--------------|--------------------|---|-----------------------|--------|----------|---|---|--|--|--|--|
| | Debtor 1 | | Marmolejo | | | | | | | | | | |
| | | First Name | Middle Name | | Last Name | | Che | eck if this is: | | | | | |
| Debtor 2 (Spouse, if filing) | | First Name | | Middle Name | Last Nan | ne. | | _ | An amended filing | | | | |
| | United States Bankr | | for the: | | DISTRICT OF T | | | | A supplement showing postpetition | | | | |
| | Case number | upicy Court | ioi trie. | WESTERNE | | LAAO | | | chapter 13 income as of the following date: | | | | |
| | (if known) | | | | | | | | MM / DD / YYYY | | | | |
| | ficial Form 10 | | | | | | | | | | | | |
| Sc | chedule I: You | ur Incor | ne | | | | | | 12/15 | | | | |
| Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment | | | | | | | | | | | | | |
| 1. | Fill in your emploinformation. | yment | | | | | | | 5 to 6 m | | | | |
| | If you have more the | nan one | | | Debtor 1 | | | | Debtor 2 or non-filing spouse | | | | |
| | job, attach a separ with information ab | | Employment status | ✓ EmployedNot employed | | | | ☐ Employed☐ Not employed | | | | | |
| | additional employe | | Occupation | | Self Employed | | | | | | | | |
| | Include part-time, so or self-employed w | | · | oyer's name | Southwest by Santa Fe | | | | | | | | |
| | Occupation may in student or homema | | Employer's address | | 13219 Round Dance Rd | | | | Number Street | | | | |
| | applies. | a, | | | | | | Number Street | | | | | |
| | | | | | | | | | _ | | | | |
| | | | | | El Paso | | TX | 79938 | | | | | |
| | | | | | City | | State | | City State Zip Code | | | | |
| How long employed there? 9 years | | | | | | | | | | | | | |
| | | | | nthly Incom | | | | | | | | | |
| nor | n-filing spouse unless | s you are se | parated. | | | | | | , write \$0 in the space. Include your | | | | |
| | ou or your non-tiling I need more space, a | | | | er, combine the i | ntorma | tion foi | r all employe | rs for that person on the lines below. If | | | | |
| | | | | | | | For I | Debtor 1 | For Debtor 2 or non-filing spouse | | | | |
| 2. List monthly gross wages, salary, and commissions (before all 2. payroll deductions). If not paid monthly, calculate what the monthly wage would be. | | | | | | | | | | | | | |
| 3. | Estimate and list | | 3. | + | \$0.00 | | | | | | | | |
| 4. Calculate gross income. Add line 2 + line 3. | | | | | | 4. | | \$0.00 | | | | | |

| Debt | tor 1 Everaldo Marmolejo | | Case nun | nber (if know | n) | |
|------|--|--------------|------------------------|---------------|----------------|------------------------|
| | | | For Debtor 1 | For Debto | | |
| | Copy line 4 here | 4. | \$0.00 | | | • |
| 5. | List all payroll deductions: | | | | | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | | | |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | | |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | | |
| | 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | | |
| | 5e. Insurance | 5e. | \$0.00 | | | |
| | 5f. Domestic support obligations | 5f. | \$0.00 | | | |
| | 5g. Union dues | 5g. | \$0.00 | | | |
| | 5h. Other deductions. Specify: | 5h. - | \$0.00 | | | |
| 6. | Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$. | 6. | \$0.00 | | | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | | | |
| 8. | List all other income regularly received: | | | · | | |
| | 8a. Net income from rental property and from operating a business, profession, or farm | 8a. | \$3,525.00 | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | |
| | 8b. Interest and dividends | 8b. | \$0.00 | | | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | |
| | 8d. Unemployment compensation | 8d. | \$0.00 | | | |
| | 8e. Social Security | 8e. | \$0.00 | | | |
| | 8f. Other government assistance that you regularly receive | | | | | |
| | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | |
| | Specify: | 8f. | \$0.00 | | | |
| | 8g. Pension or retirement income | 8g. | \$0.00 | | | |
| | 8h. Other monthly income. | | | | | |
| | Specify: | 8h. - | \$0.00 | | | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$3,525.00 | | | |
| | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. | 10. | \$3,525.00 | + |]= | \$3,525.00 |
| | State all other regular contributions to the expenses that you list in S | Schedu | ıle J. | | | |
| | Include contributions from an unmarried partner, members of your house friends or relatives. | | | r roommates | , and othe | er |
| | Do not include any amounts already included in lines 2-10 or amounts the | at are r | not available to pay e | expenses list | | |
| | Specify: | | | | _ 11. - | ÷ <u>\$0.00</u> |
| | Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilities | | | | 12. | \$3,525.00 Combined |
| | if it applies. Do you expect an increase or decrease within the year after you file | this fo | rm? | | | monthly income |
| | ✓ No. None. | | - | | | |
| | Yes. Explain: | | | | | |

| Debtor 1 | Everaldo Marmolejo | | Case number (if known) | |
|----------------|----------------------|-------------------------|------------------------|-------------|
| 8a. Attached | Statement (Debtor 1) | | | |
| | | Southwest by Santa FE | | |
| Gross Mont | hly Income: | | | \$17,075.00 |
| Expense | | Category | Amount | |
| Less Supplie | S | Less Supplies | \$3,175.00 | |
| Transportation | on shipping | Transportation shipping | \$1,890.00 | |
| Taxes | | Taxes | \$1,675.00 | |
| Bills | | Bills | \$410.00 | |
| Rent | | Rent | \$2,000.00 | |
| Employee W | ages | Employee Wages | \$4,400.00 | |
| Total Month | ly Expenses | | | \$13,550.00 |
| Net Monthly | Income: | | | \$3,525.00 |

| | ill in this inform | ation to identify | v vour case: | | | | | |
|-----------------|---|---|---|-----------------|-----------------------|--------------|--|-------------------------------|
| | Debtor 1 | Everaldo First Name | Middle Name | Marn Last Na | nolejo ame | , — | his is: mended filing pplement showing | postpetition |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Na | ame | chap | oter 13 expenses as wing date: | s of the |
| | | | WESTERN DISTR | | | <u> </u> | /BB //000/ | _ |
| | Case number (if known) | | | | | IVIIVI / | DD / YYYY | |
| O | fficial Form 10 | 6J | | | | I | | |
| | chedule J: Yo | | ; | | | | | 12/15 |
| nai | rect information. If me and case numbe | more space is nee | | | | | | |
| | | | loid | | | | | |
| 1. | No □ Yes | e 2. ebtor 2 live in a sep . Debtor 2 must file | oarate household? Official Form 106J-2, | Expense | s for Separate Housel | nold of Debt | or 2. | |
| 2. | Do you have depe | Land 🗹 | No Yes. Fill out this inform | | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Debtor 2. | i dila | for each dependent | | Daughter | | age 16 | No No |
| | Do not state the de names. | ependents' | | | Son | | 10 | Yes No |
| | | | | | | | | ⁻☑ Yes ☐ No |
| | | | | | | | _ | Yes |
| | | | | | | | | □ No - □ Yes |
| | | | | | | | | □ No |
| 3. | Do your expenses expenses of peop yourself and your | le other than dependents? | ✓ No ☐ Yes | SOS | | | | Yes |
| Es ^t | timate your expense | es as of your bankr | uptcy filing date unle pankruptcy is filed. If | ss you a | - | | • | |
| | | | government assistan Schedule I: Your Inco | • | | | Your expens | ses |
| 4. | | | nses for your residence ny rent for the ground of | | | | 4. | \$525.00 |
| | If not included in | | 0 | | | | | |
| | 4a. Real estate ta | ixes | | | | | 4a | |
| | 4b. Property, hom | neowner's, or renter's | s insurance | | | | 4b | |
| | 4c. Home mainte | nance, repair, and u | pkeep expenses | | | | 4c | |
| | 4d Homeowner's | association or cond | lominium dues | | | | 4d | |

| 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d | Everaido marmolejo | Case number (if known) |
|--|---|------------------------|
| 6. Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other. Specify: 6d. Other. Specify: 6d. Other specify: 6d. Othe | | Your expenses |
| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other Insurance 6d. Specify: 6d. Other Specify: 6d. Oth | 5. Additional mortgage payments for your residence, such as home equity loans | 5. |
| 6b. Water, sewer, garbage collection 6b. \$12 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$20 6d. Other. Specify: 6d. 6d. 7. Food and housekeeping supplies 7. \$75 8. Childcare and children's education costs 8. 8. 9. Clothing, laundry, and dry cleaning 9. \$18 10. Personal care products and services 10. \$18 11. Medical and dental expenses 11. \$18 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$38 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$15 14. Charitable contributions and religious donations 14. 15. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. 15b. 15b. Health insurance 15c. \$10 15c. Vehicle insurance. Specify: 15d. 15d. 15c. Vehicle insurance. Specify: 15d. 15d. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 5pecify: 16. 17. Installment or lease payments: | 6. Utilities: | |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other insurance deducted from your pay or included in lines 4 or 20. 8 | 6a. Electricity, heat, natural gas | 6a. \$180.00 |
| cable services 6d. Other. Specify: 6d. 7. Food and housekeeping supplies 7. \$75 8. Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. \$18 10. Personal care products and services 10. \$18 11. Medical and dental expenses 11. \$18 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$38 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. Health insurance 15c. \$10 15d. Other insurance. Specify: 15d. 15d. Other insurance. Specify: 15d. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 15d. 15d. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17b. 17b. 17b. 17b. Car payments for Vehicle 2 | 6b. Water, sewer, garbage collection | 6b. \$120.00 |
| 6d. Other. Specify: 6d. 7. Food and housekeeping supplies 7. \$75 8. Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. \$16 10. Personal care products and services 10. \$16 11. Medical and dental expenses 11. \$18 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$35 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$10 15d. Other insurance. Specify: 15d. 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. 17b. | | 6c. \$205.00 |
| 7. Food and housekeeping supplies 7. \$75 8. Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. \$16 10. Personal care products and services 10. \$16 11. Medical and dental expenses 11. \$18 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$38 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. 15. 14. Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. 15b. 15b. Health insurance 15c. \$10 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 5pecify: 16. 17. Installment or lease payments: 17a. 17a. 17a. 17b. Car payments for Vehicle 1 17a. 17b. | | 6d. |
| 9. Clothing, laundry, and dry cleaning 9. \$18 10. Personal care products and services 10. \$18 11. Medical and dental expenses 11. \$18 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$38 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$15 14. Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$10 51c. \$10 51c. \$10 51c. \$10 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. 17a. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Stall 17d. Other insurance of the contribution of | | 7. \$750.00 |
| 10. Personal care products and services 10. \$18 11. Medical and dental expenses 11. \$18 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$38 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$15 14. Charitable contributions and religious donations 14. 14. 15. Insurance. | 8. Childcare and children's education costs | 8. |
| 11. Medical and dental expenses 11. \$18 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$38 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$15 14. Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. 15b. 15b. Health insurance 15b. 15c. \$10 15c. Vehicle insurance 15c. \$10 15d. Other insurance. Specify: 15d. 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 16. 16. 17. Installment or lease payments: 17a. 17a. 17a. 17b. Car payments for Vehicle 1 17a. 17b. 17b. | 9. Clothing, laundry, and dry cleaning | 9. \$180.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. This allowed an interval in the same i | 10. Personal care products and services | 10. \$180.00 |
| fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Insurance 1 17c. Insurance 1 17d. Insurance 1 | 11. Medical and dental expenses | 11. \$180.00 |
| magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 | | 12. \$380.00 |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance 15c. \$10. 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. | | 13. \$150.00 |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. \$10 15d. Other insurance. Specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 | 14. Charitable contributions and religious donations | 14. |
| 15a. Life insurance 15b. Health insurance 15b. 15c. Vehicle insurance 15c. \$10. 15d. Other insurance. Specify: 15d. 15d. 15d. 15d. 15d. 15d. 15d. 15d. | | |
| 15b. Health insurance 15b. 15c. Vehicle insurance 15c. \$10 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. | , , , | |
| 15c. Vehicle insurance 15c. \$10 15d. Other insurance. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. | | |
| 15d. Other insurance. Specify: | | |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Unique taxes deducted from your pay or included in lines 4 or 20. 16. Installment or lease payments: 17a. Installment or lease payments for Vehicle 1 17b. Installment or lease payments for Vehicle 2 | | |
| Specify: | | 15d |
| 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17b. | | 16. |
| 17b. Car payments for Vehicle 2 | 17. Installment or lease payments: | |
| · · | 17a. Car payments for Vehicle 1 | 17a |
| 17c. Other. Specify: 17c | 17b. Car payments for Vehicle 2 | 17b |
| | 17c. Other. Specify: | 17c |
| 17d. Other. Specify: 17d | 17d. Other. Specify: | 17d. |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | | 18 |
| 19. Other payments you make to support others who do not live with you. Specify: 19. | | 19 |

| Deb | tor 1 | Everaldo Marmolejo | Case number (if known) | |
|-----|----------|---|------------------------|------------|
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a. | |
| | 20b. | Real estate taxes | 20b. | _ |
| | 20c. | Property, homeowner's, or renter's insurance | 20c. | _ |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d. | _ |
| | 20e. | Homeowner's association or condominium dues | 20e. | |
| 21. | Othe | . Specify: | 21. + | |
| 22. | Calc | late your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a. | \$2,950.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 2. 22b. | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$2,950.00 |
| 23. | Calc | ulate your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$3,525.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. – | \$2,950.00 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | \$575.00 |
| 24. | Do y | ou expect an increase or decrease in your expenses within the year after yo | ou file this form? | |
| | | xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mort | . , | |
| | | No | | |
| | 7 | Yes. Explain here: Mr and wife are estranged. | | |
| | | | | |
| | | | | |

| Fill in this | information to i | dentify your case | : | I | |
|----------------------------------|---------------------------|---|--|---|------------------------------------|
| | | | _ | | |
| Debtor 1 | Everaldo First Name | Middle Name | Marmolejo Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if fil | ling) First Name | Middle Name | Last Name | | |
| United States | s Bankruptcy Court fc | or the: WESTERN DIS | STRICT OF TEXAS | | |
| Case number | r | | | ☐ Checki | f this is an |
| (if known) | | | | amende | |
| Official Fo | orm 106Sum | | | | |
| Summary | of Your Asse | ets and Liabilit | ies and Certain Stat | istical Information | 12/1 |
| correct inform schedules afte | nation. Fill out all of | your schedules first; inal forms, you must f | then complete the informatio | both are equally responsible for in on this form. If you are filing neck the box at the top of this | g amended |
| | | | | | Your assets |
| | | | | | Value of what you own |
| . Schedule | A/B: Property (Official | al Form 106A/B) | | | |
| 1a. Copy | y line 55, Total real es | state, from Schedule A | /B | | \$0.00 |
| 1b. Copy | y line 62, Total persoi | nal property, from Sche | dule A/B | | \$38,283.00 |
| 1с. Сору | y line 63, Total of all դ | property on Schedule A | /B | | \$38,283.00 |
| Part 2: | Summarize You | r Liabilities | | | |
| | | | | | Your liabilities Amount you owe |
| | | • | Property (Official Form 106D) f claim, at the bottom of the last | page of Part 1 of Schedule D | \$9,403.78 |
| | | | s (Official Form 106E/F) | | \$40.4E4.4E |
| 3a. Copy | y the total claims from | n Part 1 (priority unsecu | ured claims) from line 6e of Sch | edule E/F | \$12,454.15 |
| 3b. Сору | y the total claims fron | າ Part 2 (nonpriority uns | secured claims) from line 6j of S | Schedule E/F | + \$53,138.90 |
| | | | | Your total liabilities | \$74,996.83 |
| | | | | | |
| Part 3: | Summarize You | r Income and Exp | enses | | |
| . Schedule | e I: Your Income (Offic | cial Form 106l) | | | \$3,525.00 |
| Schedule Copy you | e I: Your Income (Offic | cial Form 106I) ncome from line 12 of S | | | \$3,525.00 |

| Del | btor 1 | Everaldo Marmolejo | Case number (if known) |
|-----|-----------|---|---|
| Р | art 4: | Answer These Questions for Administrative and Statist | ical Records |
| 6. | Are you | u filing for bankruptcy under Chapters 7, 11, or 13? | |
| | □ No ✓ Ye | You have nothing to report on this part of the form. Check this box and ses | submit this form to the court with your other schedules. |
| 7. | What k | ind of debt do you have? | |
| | | our debts are primarily consumer debts. Consumer debts are those "incimily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stat | |
| | | our debts are not primarily consumer debts. You have nothing to report is form to the court with your other schedules. | on this part of the form. Check this box and submit |
| 8. | | he Statement of Your Current Monthly Income: Copy your total current in Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | , to the second |
| 9. | Copy tl | he following special categories of claims from Part 4, line 6 of Schedul | le E/F: |
| | | | Total claim |
| | From P | Part 4 on Schedule E/F, copy the following: | |
| | 9a. Do | omestic support obligations. (Copy line 6a.) | \$0.00 |
| | 9b. Ta | axes and certain other debts you owe the government. (Copy line 6b.) | <u>\$10,064.15</u> |

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

\$0.00

\$10,064.15

| | | | | _ |
|---------------------------------|--|----------------------|--------------------------------|---|
| Fill in this inf | ormation to i | dentify your case: | | |
| Debtor 1 | Everaldo | | Marmolejo | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| | | | | |
| United States Ba | nkruptcy Court fo | or the: WESTERN DIS | TRICT OF TEXAS | |
| Case number (if known) | | | | ☐ Check if this is an |
| (II KIIOWII) | | | | amended filing |
| Official Form | 106Dec | | | |
| Declaration | About an I | ndividual Debt | or's Schedules | 12/1 |
| | n Below or agree to pay s | someone who is NOT a | an attorney to help you fill o | ut bankruptcy forms? |
| √ No | | | | |
| Yes. Na | ame of person | | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| true and corr | ect. Ido Marmolejo Marmolejo, Debto | | X Signature of Debtor 2 Date | filed with this declaration and that they are |
| | / DD / YYYY | | MM / DD / YYYY | _ |

| F | ill in this inf | ormation to i | dentify your | case: | | | | | | |
|-----------|---------------------------------------|--|--------------------|-----------|-------------------|----------------|------------|-----------|-------------|-------------------------------|
| De | ebtor 1 | Everaldo | | | Marmolejo | | | | | |
| | | First Name | Middle Nam | е | Last Name | | | | | |
| | ebtor 2 pouse, if filing) | First Name | Middle Nam | Α | Last Name | | | | | |
| | - | | | | | | | | | |
| Uı | nited States Bar | nkruptcy Court fo | or the: WESTER | RN DIST | RICT OF TEX | AS | | | | |
| | ase number known) | | | | | _ | | | Check if to | |
| <u>Of</u> | ficial Form | 107 | | | | | | | | |
| St | atement o | f Financial | Affairs for | r Indiv | iduals Fil | ing for Ba | ankrupto | y | | 04/16 |
| 1. 2. | What is your ☐ Married ☑ Not marrie | current marital ed | status? | | | | | • | | |
| | _ | all of the places | you lived in the l | | | | live now. | | | Detec Debter 9 |
| | Debtor 1: | | | lived | Debtor 1 there | Debtor 2: | | | | Dates Debtor 2 lived there |
| | | | | | | ☐ Same a | s Debtor 1 | | | ☐ Same as Debtor |
| | 10924 By | wood | | From | April 2012 | | | | | From |
| | | Street | | To | July 2015 | Number St | reet | | | |
| | | | | _ | | | | | | _ |
| | El Paso | T | | _ | | | | | | _ |
| | City | Sta | ate ZIP Code | | | City | | State ZIP | Code | |
| 3. | (Community p Washington, a ✓ No | st 8 years, did yo roperty states an and Wisconsin.) | | ude Arizo | na, California, I | daho, Louisiar | | | | • |

| Deb | btor 1 Everaldo Marmolejo Case number (if known) | | | | | | | | |
|-----|--|--|--|--|--|--|--|--|--|
| Р | art 2: Explain the Sources of Your Income | | | | | | | | |
| 4. | Fill in th | La have any income from employ the total amount of income you recorder filing a joint case and you have | eived from all jobs and all bus | inesses, including part | t-time activities. | endar years? | | | |
| | □ No ✓ Yes | s. Fill in the details. | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | | | |
| | | ary 1 of the current year until u filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$13,692.00 | | | | | |
| | | calendar year: December 31, | ✓ Wages, commissions, bonuses, tips✓ Operating a business | Unknown | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | | |
| | | o December 31, 2015) | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$14,427.00 | | | | | |
| 5. | Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. | | | | | | | | |
| | √ No | ch source and the gross income from the the gross income growth and the growt | om each source separately. [| Oo not include income | that you listed in line 4. | | | | |

| Deb | otor 1 | Everaldo Marmolejo | | | | Case number (if kno | own) |
|-----------|-------------------------------------|---|---|----------------------------------|---|---|--|
| P | art 3: | List Certain Paym | ents You Ma | ide Before ` | You Filed for Ba | nkruptcy | |
| 6. | Are eith | er Debtor 1's or Debtor | 2's debts prima | rily consume | r debts? | | |
| | □ No. | Neither Debtor 1 nor "incurred by an individ | - | - | | | ed in 11 U.S.C. § 101(8) as |
| | | During the 90 days be | fore you filed for | bankruptcy, di | d you pay any credit | or a total of \$6,425 | or more? |
| | | ☐ No. Go to line 7. | | | | | |
| | | total amount | you paid that cre | editor. Do not i | total of \$6,425* or n nclude payments for ude payments to an | domestic support of | obligations, such as |
| | | * Subject to adjustmen | nt on 4/01/19 and | d every 3 years | after that for cases | filed on or after the | date of adjustment. |
| | √ Yes. | Debtor 1 or Debtor 2 | or both have pr | imarily consu | mer debts. | | |
| | _ | During the 90 days be | fore you filed for | bankruptcy, di | d you pay any credit | or a total of \$600 or | more? |
| | | ☐ No. Go to line 7. | | | | | |
| | | | not include payn | nents for dome | total of \$600 or mor stic support obligation y for this bankruptcy | ons, such as child s | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | еМах | | | _ | \$650.00 | _ | Mortgage |
| | ditor's name) S. Main | | | 3/2017 | | | ☐ Car ☐ Credit card |
| Nun | ber Stre | et | | _ | | | Loan repayment |
| | | | | _ | | | Suppliers or vendors |
| | hony | TX | 79821 | <u> </u> | | | Other |
| 7. | Insiders corporat agent, in such as | ions of which you are an Icluding one for a busine child support and alimon | ny general partne officer, director, ss you operate a y. | ers; relatives of person in cont | f any general partner rol, or owner of 20% | rs; partnerships of v or more of their vot | e who was an insider? which you are a general partner; ing securities; and any managing ts for domestic support obligations |
| | ☐ Yes. | . List all payments to an | insider. | | | | |

| Debtor 1 Everaldo Marmo | lejo | Case number (if known) | | | | | | | |
|--|---|---|-----------|--|--|--|--|--|--|
| 8. Within 1 year before you f benefited an insider? | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? | | | | | | | | |
| Include payments on debts | guaranteed or cosigned by an insider. | | | | | | | | |
| ✓ No ☐ Yes. List all payments | that benefited an insider. | | | | | | | | |
| Part 4: Identify Legal | Actions, Repossessions, and I | Foreclosures | | | | | | | |
| - | ng personal injury cases, small claims a | n any lawsuit, court action, or administrative proceeding? ctions, divorces, collection suits, paternity actions, support or co | ustody | | | | | | |
| No✓ Yes. Fill in the details. | | | | | | | | | |
| Case title | Nature of the case | Court or agency Status of t | the case | | | | | | |
| XPO Logistics LLC vs Evera | aldo Breach of Contract | El Paso County | Pending | | | | | | |
| Marmelejo, Individially and | dba | Court Name | i enumy | | | | | | |
| Southwest by Santa Fe | | | On appeal | | | | | | |
| Case number 2016DCV1493 | | Number Street 500 E. San Antonio, Suite 1001 | Concluded | | | | | | |
| | | | | | | | | | |
| | | El Paso TX 79901 City State ZIP Code | | | | | | | |
| 0 | Natura af dia anno | 0.000 | (1 | | | | | | |
| Case title | Nature of the case | Court or agency Status of t | ine case | | | | | | |
| Albuquerque Hardowood | Judgement | Second Judicial District Court Court Name | Pending | | | | | | |
| Lumper Co, INC vs. Everald Marmolejo | 0 | Pornalilla County Courthouse | | | | | | | |
| wiai iliolejo | | Number Street | On appeal | | | | | | |
| Case number D-202-CV-2015 | -5664 | | Concluded | | | | | | |
| | | Albuquerque NM 87103 | | | | | | | |
| | | City State ZIP Code | | | | | | | |
| Case title | Nature of the case | Court or agency Status of t | the case | | | | | | |
| Shizoom, LLC vs Southwes | | Supreme Court of State of New York | | | | | | | |
| Santa Fe and everaldo | t by Guagomont | Court Name | Pending | | | | | | |
| Marmolejo | | 444 Dr. Martin Luthar King Ir Dlud | On appeal | | | | | | |
| | | Number Street | On appear | | | | | | |
| Case number <u>52061-2016</u> | | 9th floor | Concluded | | | | | | |
| | | White Plains NY 10601 | | | | | | | |
| | | Ott. Ott. 7ID O-1- | | | | | | | |

| Deb | tor 1 | Everaldo Marmolejo | Case number (if known) |
|-----|----------------------|---|---|
| 10. | seized, | year before you filed for bankruptcy, was any of your property reposor levied? Il that apply and fill in the details below. | sessed, foreclosed, garnished, attached, |
| | بخا | Go to line 11. Fill in the information below. | |
| 11. | | 00 days before you filed for bankruptcy, did any creditor, including a b s from your accounts or refuse to make a payment because you owed | |
| | ✓ No ☐ Yes | . Fill in the details. | |
| 12. | | year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official? | possession of an assignee for the benefit of |
| | ✓ No ☐ Yes | | |
| Pa | art 5: | List Certain Gifts and Contributions | |
| 13. | Within 2 | 2 years before you filed for bankruptcy, did you give any gifts with a to | tal value of more than \$600 per person? |
| | ✓ No ☐ Yes | . Fill in the details for each gift. | |
| 14. | Within 2 to any o | ? years before you filed for bankruptcy, did you give any gifts or contri harity? | butions with a total value of more than \$600 |
| | ☑ No □ Yes | . Fill in the details for each gift or contribution. | |
| Pa | art 6: | List Certain Losses | |
| 15. | | year before you filed for bankruptcy or since you filed for bankruptcy saster, or gambling? | , did you lose anything because of theft, fire, |
| | ✓ No ☐ Yes | . Fill in the details. | |

| Debtor 1 Ev | veraldo Marm | olejo | Case number (if | known) | |
|--|---------------------|-----------------------|---|---|-------------------|
| Part 7: | List Certain | Payments o | r Transfers | | |
| anyone yo | ou consulted al | oout seeking ba | uptcy, did you or anyone else acting on your behalf pay ankruptcy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services requi | | • |
| | ill in the details | | | | |
| Watson Law I | | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| 1123 E. Rio G Number Street | rande | | _ | 03/29/2017 | \$1,210.00 |
| El Paso | тх | 79902 | _ | | |
| City | State | ZIP Code | _ | | |
| Email or website ad | ddress | | _ | | |
| Person Who Made E.P BUD KIRI Person Who Was | K | ot You | Description and value of any property transferred Attorney Fees | Date payment or transfer was made | Amount of payment |
| 500 Sundland | l Park Dr. | | _ | May 12, 2016 | \$1,534.00 |
| Building Four | r, Ste 400 | | _ | | |
| El Paso City budkirk@aol. Email or website ad | | 79912 ZIP Code | _ _ | | |
| Person Who Made | e the Payment, if N | ot You | _ | | |
| - | - | | uptcy, did you or anyone else acting on your behalf pay with your creditors or to make payments to your credit | | perty to |
| Do not incl | ude any payme | nt or transfer tha | at you listed on line 16. | | |
| ✓ No ☐ Yes. F | Fill in the details | | | | |

| Deb | otor 1 | Everaldo Marmolejo | | Case number (if known) | |
|------|--|---|--|---|-------------------|
| 18. | | • | bankruptcy, did you sell, trade, or o y course of your business or financ | therwise transfer any property to anyono al affairs? | e, other than |
| | | | ansfers made as security (such as gra it you have already listed on this stater | nting of a security interest or mortgage on ynent. | our property). |
| | ✓ No ☐ Yes | s. Fill in the details. | | | |
| 19. | | • | r bankruptcy, did you transfer any p e often called asset-protection devices | roperty to a self-settled trust or similar o | levice of which |
| | ☐ Yes | s. Fill in the details. | | | |
| P | art 8: | List Certain Financia | al Accounts, Instruments, Saf | e Deposit Boxes, and Storage Un | its |
| 20. | | 1 year before you filed for b | | ints or instruments held in your name, o | r for your |
| | Include | checking, savings, money m | | ficates of deposit; shares in banks, credit utitions. | ınions, brokerage |
| | ✓ No ☐ Yes | s. Fill in the details. | | | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | |
| | ✓ No ☐ Yes | s. Fill in the details. | | | |
| 22. | - | ou stored property in a stor | age unit or place other than your ho | me within 1 year before you filed for bar | kruptcy? |
| | ✓ No □ Yes | s. Fill in the details. | | | |
| Ρ | art 9: | Identify Property Yo | u Hold or Control for Someon | e Else | |
| 23. | - | hold or control any proper in trust for someone. | ty that someone else owns? Include | any property you borrowed from, are s | toring for, |
| | □ No ✓ Yes | s. Fill in the details. | | | |
| | | | Where is the property? | Describe the property | Value |
| | da Sulli ner's Name | | _ | Chairs | \$4,000.00 |
| 132 | 219 Rou | ind Dance Rd. | Las Cruces, NM Number Street | | |
| El I | Paso | TX 79938 | | | |
| City | | State ZIP Code | City State ZIP C | ode | |

| Debtor 1 | Everaldo | o Mar | molejo | | | | Case number (if known) | |
|--|--|---|--|--|---|--|---|------------------------------|
| | | | | Where is | s the property? | | Describe the property | Value |
| Javier He | | | | _ | | | Flatbed trailer 12' | \$2,000.00 |
| | | D. | | Vyotto S | Stroot | | | |
| | ound Dance Street | יט פּ | | Yvette S Number | Street | | _ | |
| El Paso | | тх | 79938 | El Paso | | 79924 | _ | |
| City | | State | ZIP Code | City | State | ZIP Code | | |
| Part 10 | Give D |)etai | ls About E | nvironme | ental Informatio | on | | |
| For the pu | rpose of Pa | rt 10, | the followin | g definitions | s apply: | | | |
| hazard includi Site me utilize i Hazard substa | ous or toxic ng statutes eans any loc it or used to dous materia nce, hazard notices, rele | subs or reg cation own, own, al mea ous m | tance, waste gulations con , facility, or operate, or ans anything naterial, poll , and procee | es, or materintrolling the property as utilize it, incorrent an environiutant, contaited ings that y | rial into the air, land cleanup of these cleanup of these cleanup of these cluding disposal sumental law define aminant, or similar you know about, r | d, soil, surfaction substances, of environmentites. s as a hazarditem. egardless of the substances of the substances of the substance of the | cerning pollution, contamination ce water, groundwater, or other i wastes, or material. Ital law, whether you now own, of ous waste, hazardous substance when they occurred. Italian they occurred. | medium, operate, or e, toxic |
| ☑ N | lo es. Fill in the | e deta | ils. | | | | | |
| | - | any | government | al unit of any | y release of hazar | dous materia | l? | |
| ☐ Y | lo es. Fill in the | e deta | ils. | | | | | |
| 26. Have order | • | party | in any judic | ial or admin | nistrative proceedi | ng under any | environmental law? Include set | ttlements and |
| ☐ Y | lo 'es. Fill in the | e deta | ils. | | | | | |

| Debtor 1 | Everaldo Marmolejo | 1 | | Ca | ase number | (if known) | | | | |
|------------------------------|--|--|---|--|--------------|------------------------------------|-------------|------------|--------|----------|
| Part ' | 11: Give Details Abo | ut Your Busines: | or Connect | ions to Any I | Business | i | | | | |
| | hin 4 years before you filed siness? | l for bankruptcy, did | you own a bus | iness or have a | ny of the fo | ollowing co | nnection | s to any | | |
| | A sole proprietor or seling A member of a limited A partner in a partnershing An officer, director, or rough An owner of at least 5% | liability company (LLC nip managing executive o | e) or limited liabil f a corporation | ity partnership (L | | or part-time | • | | | |
| | No. None of the above apply Yes. Check all that apply at | | ails below for ea | ch business. | | | | | | |
| Southw | vest By Santa Fe | Describe the Furniture M | nature of the b anufactor | usiness | | er Identifica nclude Soc | | | or ITI | N. |
| Business 1329 R Number | Name ound Dance Rd Street | Name of acc | ountant or book | kkeeper | _ | <u>7</u> – <u>1</u> usiness exi | | 9 3 | 3 | <u>6</u> |
| | | | | | From | 2008 | То | Present | | |
| El Paso | TX 79938 State ZIP Cod | | | | _ | | | | | |
| | No Yes. Fill in the details below 12: Sign Below | v. | | | | | | | | |
| hat ans | ead the answers on this Sta wers are true and correct. y by fraud in connection wit 18 U.S.C. §§ 152, 1341, 15 | I understand that math that math the land that math the land that the land the l | aking a false sta | atement, concea | aling prope | rty, or obta | ining mo | ney or | | |
| | veraldo Marmolejo aldo Marmolejo, Debtor 1 | x | Signature of D | ehtor 2 | | | | | | |
| Date | 04/14/2017 | | Date | —————————————————————————————————————— | | | | | | |
| Did you | attach additional pages to | Your Statement of Fi | nancial Affairs | for Individuals I | Filing for B | ankruptcy | (Official I | Form 107)? | • | |
| ☑ No □ Yes | | | | | | | | | | |
| Did you | pay or agree to pay someo | ne who is not an atte | orney to help yo | ou fill out bankr | uptcy form | s? | | | | |
| ✓ No ☐ Yes | Name of person | | | | | he <i>Bankru</i> tion, and Si | • | | | |
| | | | | | | | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| \$75 | filing fee administrative fee trustee surcharge |
|-------|---|
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| + | | filing fee administrative fee |
|---|---------|----------------------------------|
| | \$1 717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| + | | filing fee administrative fee |
|---|-------|----------------------------------|
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| + | | filing fee administrative fee |
|---|-------|----------------------------------|
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS EL PASO DIVISION

| n re Everaldo Marmolejo | Case No. | |
|--|---|----------------------------------|
| | Chapter | 13 |
| DISCLOSURE OF COMPENS | SATION OF ATTORNEY FO | R DEBTOR |
| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 that compensation paid to me within one year before the services rendered or to be rendered on behalf of the d is as follows: | he filing of the petition in bankruptcy, or | agreed to be paid to me, for |
| For legal services, I have agreed to accept | <u></u> | \$3,600.00 |
| Prior to the filing of this statement I have received | <u> </u> | 51,210.00 |
| Balance Due | <u></u> | \$2,390.00 |
| 2. The source of the compensation paid to me was: ☑ Debtor ☐ Other (specify) | | |
| 3. The source of compensation to be paid to me is: | | |
| ☑ Debtor ☐ Other (specify) | | |
| I have not agreed to share the above-disclosed co associates of my law firm. | ompensation with any other person unle | ess they are members and |
| ☐ I have agreed to share the above-disclosed comp associates of my law firm. A copy of the agreeme compensation, is attached. | | |
| 5. In return for the above-disclosed fee, I have agreed to | render legal service for all aspects of t | he bankruptcy case, including: |
| a. Analysis of the debtor's financial situation, and rend bankruptcy; | dering advice to the debtor in determining | ng whether to file a petition in |
| b. Preparation and filing of any petition, schedules, sta | atements of affairs and plan which may | be required; |
| c. Representation of the debtor at the meeting of cred | litors and confirmation hearing, and any | y adjourned hearings thereof; |

| | / | 0000 | 140145 | ١ |
|-------|-------|-------|---------|---|
| B2030 | (Form | 20301 | (12/15) |) |

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/14/2017 /s/ Karla P. Griffin

Date Karla P. Griffin

Watson Law Firm, P.C. 1123 E. Rio Grande El Paso, Texas 79902

Phone: (915) 562-4357 / Fax: (866) 201-0967

Bar No. 24074659

/s/ Everaldo Marmolejo

Everaldo Marmolejo

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS EL PASO DIVISION

IN RE: Everaldo Marmolejo CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her

| knowledge. | | |
|----------------|-----------|---|
| | | |
| | | |
| Date 4/14/2017 | Signature | /s/ Everaldo Marmolejo |
| | Olgridia | /s/ Everaldo Marmolejo Everaldo Marmolejo |
| | | |

Albuquerque Hardwood Lumper CO, INC C/O Elizabeth L. German German & Associates, LLC 11728 Linn Avenue, NE Albuquerque, NM 87123

Atlas Logistics 1212 S. George Road Evansville, IN 47711

Capital One Attn: General Correspondence/Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Check N Go 1461 N. Lee Trevino El Paso, TX 79936

CitiCards Private Label Citicorp Cr Srvs/Centralized Bankruptcy PO Box 790040 St Louis, MO 63129

Coastal Pay 2445 Impala Dr. Carlsbad, CA 92010

Estes Express Lines 1130 Vista De Oro El Paso, TX 79935

First Data 5565 Glenridge Connector NE Ste 2000 Atlanta, GA 30342

First Premier Bank 601 S Minneaplois Ave Dious FDalls, SD 57104 Fox Capital Group c/o Jeffrey R. Hennen Cohen, Roberts, & Associates, LLC 1284 SOM Center Rd, Ste. 338 Cleveland, OH 44124

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

IRS Insolvecy Office 300 E. 8th Street, Mail Stop 502AUS Austin, TX 78701

Juan Bena Videz 13219 Round Dance Rd, Ste A El Paso, TX 79938

NCB Management Services, INC PO Box 1099 Langhorne, PA 19047

Office of the Atty General/Child Support Attn: Bankruptcy PO Box 12017 Austin, TX 78711

Pioneer Bank PO Box 972178 El Paso, TX 79905

Shizoom, LLC c/o Joseph I. Sussman, 333 Pearshall Ave Suite 205 Cedarhurst, NY 11516

Square 1455 Market Square #600 San Francisco, CA 94103 Stuart C. Cox, Trustee 1760 North Lee Trevino El Paso, TX 79936

Syncb/care Credit Po Box 965036 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy PO Box 956060 Orlando, FL 32896

Texas Comptroller Revenue Accounting Division Bankruptcy PO Box 13528 Austin, TX 78711

Texas Workforce Commission Regulatory Integrity Division 101 E 15th St Austin, TX 78778

Tittle Max 12488 Montana Avenue El Paso, TX 79938

Transworld System, INC Po Box 17221 Wilmington, DE 19850

United States Attorney Civil Process Clerk 601 N.W. Loop 410, Ste 600 San Antonio, TX 78216

Watson Law Firm, P.C. 1123 E. Rio Grande El Paso, Texas 79902 Wills Fargo, LLC c/o Timonthy H. Hopkins Groom & Cave, LL 1570 The Alameda Suite 100 San Jose, CA 95126

Worldmrk Exp 10750 W Charleston Blvd Las Vegas, NV 89135

XPO Logistics, LLC c/o Susan M. Forbes 711 Myrthe El Paso, TX 79901

| Ell in the | :f | :6 | | | Chock as | directed in lines 17 a | and 21: |
|--|---|--|---|--|---|---|--------------------------|
| | information to ident | iry your case: | Marmalaia | | | the calculations required b | |
| Debtor 1 | Everaldo First Name | Middle Name | Marmolejo Last Name | | Statement: | | <i>y</i> 0 |
| Debtor 2 (Spouse, if fili | ng) First Name | Middle Name | Last Name | | | ole income is not determin U.S.C. § 1325(b)(3). | ed |
| United States | Bankruptcy Court for the: | WESTERN DIST | RICT OF TEXAS | | | ole income is determined U.S.C. § 1325(b)(3). | |
| Case number | | | | | 3. The com | mitment period is 3 years. | |
| (if known) | | | _ | | 4. The com | mitment period is 5 years. | |
| Official Fo | rm 122C-1 | | | 1 | ☐ Check if th | nis is an amended filing | |
| | 3 Statement of Y | | | me | | | 12/15 |
| accurate. If moinformation ap | e and accurate as possil ore space is needed, atta plies. On the top of any Calculate Your Aver | ach a separate she additional pages, | eet to this form. Included write your name an | lude the line | e number to w | hich the additional | |
| | our marital and filing sta | - | | | | | |
| ☐ Not m | narried. Fill out Column A | , lines 2-11. | | | | | |
| — ✓ Marri | ed. Fill out both Columns | A and B, lines 2-1 | 1. | | | | |
| bankrupto August 31. in the resu | ey case. 11 U.S.C. § 101. If the amount of your mo | (10A). For example on the property of the community income varies of the community in the c | e, if you are filing on a d during the 6 months than once. For exam | September of sections, add the in sple, if both sections | 15, the 6-montl come for all 6 spouses own th | nonths before you file thin period would be March 1 months and divide the totale same rental property, paspace. | through al by 6. Fill |
| | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| _ | s wages, salary, tips, bo payroll deductions). | nuses, overtime, | and commissions | _ | \$0.00 | \$0.00 | |
| 3. Alimony a | nd maintenance payme | nts. Do not include | payments from a sp | ouse | \$0.00 | \$0.00 | |
| expenses regular cor your deper | nts from any source which of you or your dependent intributions from an unmare indents, parents, and room to not include payments you | nts, including child ried partner, memb mates. Do not incl | d support. Include ers of your household | | \$0.00 | \$0.00 | |
| 5. Net incom | e from operating a busi | ness, profession, | or farm | | | | |
| | | Debtor 1 | Debtor 2 | | | | |
| Gross rece deductions | eipts (before all s) | \$17,892.17 | \$0.00 | | | | |
| Ordinary a expenses | nd necessary operating | \$14,237.17 | \$0.00 | Conv | | | |
| • | ly income from a business | \$3,655.00 | ** | Copy nere → | \$3,655.00 | \$0.00 | |

profession, or farm

| Der | ו וטו | <u>=</u> | veraido Marmolejo | Case number (if known) | |
|-----|--------|----------|--|---|-------------|
| 15. | Calc | ulate | your current monthly income for the year. F | Follow these steps: | |
| | 15a. | Сор | y line 14 here 😝 | | \$3,655.00 |
| | | Mul | tiply line 15a by 12 (the number of months in a y | year). | X 12 |
| | 15b. | The | result is your current monthly income for the ye | ear for this part of the form. | \$43,860.00 |
| 16. | Calc | ulate | the median family income that applies to you | u. Follow these steps: | |
| | 16a. | Filli | in the state in which you live. | Texas | |
| | 16b. | Fill | in the number of people in your household. | 3 | |
| | 16c. | To f | | size of household s, go online using the link specified in the separate ilable at the bankruptcy clerk's office. | \$65,713.00 |
| 17. | How | do th | ne lines compare? | | |
| | 17a. | | · | the top of page 1 of this form, check box 1, <i>Disposable income is</i> Do NOT fill out Calculation of Your Disposable Income (Official For | |
| | 17b. | | | page 1 of this form, check box 2, <i>Disposable income is determined</i> out Calculation of Your Disposable Income (Official Form 122C outly income from line 14 above. | |
| | - 1.0 | | 0.1. I.v. V 0 | U. I. 44 U.O. C. 400F/LVA | |
| Р | art 3: | | Calculate Your Commitment Period I | Onder 11 U.S.C. § 1325(b)(4) | |
| 18. | Сору | you | r total average monthly income from line 11. | | \$3,655.00 |
| 19. | that o | calcul | | married, your spouse is not filing with you, and you contend 1325(b)(4) allows you to deduct part of your spouse's | |
| | 19a. | If th | e marital adjustment does not apply, fill in 0 on | line 19a | \$0.00 |
| | 19b. | Sub | otract line 19a from line 18. | | \$3,655.00 |
| 20. | Calc | ulate | your current monthly income for the year. F | Follow these steps: | |
| | 20a. | Cop | y line 19b | | \$3,655.00 |
| | | Mul | tiply by 12 (the number of months in a year). | | X 12 |
| | 20b. | The | result is your current monthly income for the ye | ear for this part of the form. | \$43,860.00 |
| | 20c. | Сор | by the median family income for your state and s | size of household from line 16c. | \$65,713.00 |
| 21. | How | do th | e lines compare? | | |
| | - | | 20b is less than line 20c. Unless otherwise orders box 3, <i>The commitment period is 3 years</i> . Go | ered by the court, on the top of page 1 of this form, to Part 4. | |
| | | | 20b is more than or equal to line 20c. Unless ot a form, check box 4, <i>The commitment period is</i> | therwise ordered by the court, on the top of page 1 5 years. Go to Part 4. | |

| Jebioi i | Everaido marmolejo | Case number (if known) |
|--|---|--|
| Part 4: | Sign Below | |
| By sigr | ning here, under penalty of perjury I declare tha | at the information on this statement and in any attachments is true and correct. |
| <i>-</i> • • • • • • • • • • • • • • • • • • • | Everaldo Marmolejo | X |
| Eve | eraldo Marmolejo, Debtor 1 | Signature of Debtor 2 |
| Dat | te 4/14/2017 | Date |

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.